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Change of Correspondence Address Status Letter Affidavits/declaration(s) Other Enclosure(s) (please Terminal Disclaimer Extension of Time Request Identify below): Return Receipt Postcard Request for Refund Express Abandonment Request CD, Number of CD(s) Information Disclosure Statement Remarks Certified Copy of Priority Document(s) Response to Missing Parts/ Incomplete Application Response to Missing Parts under 37 CFR 1.52 or 1.53 SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT Firm Joseph D. Kuborn (Reg. No. 40,689) Andrus, Sceales, Starke & Sawall, LLP Individual name Signature Date CERTIFICATE OF TRANSMISSION/MAILING I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below. Typed or printed name Barbara A. Johnson 9-10-04 Date Signature

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Application Of:) CERTIFICATE OF MAILING
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Method And Apparatus For Analyzing A Physiological Waveform) Boxboxal Shason 9-10-04) Barbara A. Johnson Date

REVOCATION OF POWER OF ATTORNEY AND APPOINTMENT OF NEW ATTORNEYS

MAIL STOP: NO FEE COMMISSIONER FOR PATENTS PO BOX 1450 ALEXANDRIA VA 22313-1450

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Name	Registration No.
Daniel D. Fetterley	20,323
George H. Solveson	25,927
Gary A. Essmann	29,376
Thomas M. Wozny	28,922
Michael E. Taken	28,120
Joseph J. Jochman	25,058
Joseph D. Kuborn	40,689
Jeffrey S. Sokol	35,686
Aaron T. Olejniczak	54,853
Peter T. Holsen	54,180
William L. Falk	27,709

Applicant: Willi Kaiser et al.

Applicant requests that the correspondence be sent to:

Joseph D. Kuborn
ANDRUS, SCEALES, STARKE & SAWALL
100 East Wisconsin Avenue, Suite 1100
Milwaukee, Wisconsin 53202
Tel. No.: (414) 271-7590

Respectfully submitted,

Pamela S. Krop

Vice President and General Counsel

Attorney Docket No. 31-HL-5510 (5024-00126)